

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: *(12-18-00)*

Instructions

- Print in ink or type.
 - Complete form and return with \$10 registration fee to the Board of Ethics, 8461 United Plaza Blvd., Suite 200, Baton Rouge, LA 70809-7017, (225) 972-1400 or (800) 842-6630.
 - Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

Rg-
HF 3081
16/09/02
K3

1001823

L NAME FUGLER, JR. ALLEN M.
Last First MI.

2. BUSINESSPHONE: 225-924-2742
Area Code and Phone Number

3. BUSINESS ADDRESS: 8405 CYPRESS POINT BAYOU BLUFFS, LA 70809
Street and No. City State Zip

MAILING ADDRESS. **500 E. 45th Street**, **Apt. 2001** **New York City**, **State** **Zip**

4. EMPLOYER INFORMATION

5. EMPLOYER'S ADDRESS: 84053 Cypress, Power, Baton Rouge, LA 70849
Street and No. City State Zip

6. LIST HERE (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name: Louisville PSSA Cognitive Association

Address 3042 Old Forest Dr., Baton Rouge, LA 70808

Business or purpose TRADE association for 1551 copper companies

Does this person mix you? **No**

If No, who pays you? SERVICES PROVIDED AT NO COST TO ASSOCIATION OR INDIVIDUAL

HAND DELIVERED

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2. Name LOUISIANA ATHLETIC TRAVELERS ASSOCIATION

Address _____

Business or purpose TRADE ASSOCIATION FOR ATHLETIC TRAVELERSDoes this person pay you? NO

If No, who pays you?

3. Name _____

Address _____

Business or purpose _____

Does this person pay you?

If No, who pays you?

4. Name _____

Address _____

Business or purpose _____

Does this person pay you?

If No, who pays you?

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE
FOR
INITIAL
REGISTRATION
ONLY